

11/21/00

JC945 U.S. PTO

UTILITY PATENT

Attorney Docket APPLICATION

TRANSMITTAL FIRST NAMED INVENTOR
OR APPLICATION IDENTIFIERfor nonprovisional applications under 37 CFR 1.53(b) Inventor: Odle et alTitle: PRINT ACCESS SECURITY SYSTEMEXPRESS MAIL LABEL NO.: E1514193579US Date submitted: 11/21/00

JC853 U.S. PTO

09/718530

11/21/00

APPLICATION ELEMENTS

(See MPEP chapter 600 concerning utility patent appln.)

Assistant Commissioner for Patents

Box Patent Application

Washington, D.C. 20231

1. ☒ Fee Transmittal Form
(Submit an original, and a duplicate for fee processing)
- ☒ Specification 29 Total Pages
(preferred arrangement set forth below)
- Descriptive title of the Invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R&D
 - Reference to Microfiche Appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
3. ☒ Drawing(s) (35 USC 13) 2 New Sheets
4. ☒ Decl./Pow. of Att. 3 Total pages
- a. ☐ Combined Executed (original or copy) for C-I-P application)
 - b. ☐ Copy from a prior appln. (37 CFR 1.63(d))
(for continuation/divisional with Box 17 completed)
- [Note Box 5 Below]
- I. ☐ Deletion of Inventor(s)
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)
5. ☐ Incorporation By Reference (useable if Box 4b is checked)
The entire disclosure of the prior application, from which a copy of the Oath or Declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.
6. Microfiche Computer Program (Appendix)
7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
- a. ☐ Computer Readable Copy
 - b. ☐ Paper Copy (Identical to computer copy)
 - c. ☐ Statement verifying identity of above copies
- ACCOMPANYING APPLICATION PARTS:
8. ☐ Assignment Papers (cover sheet & documents(s))
9. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney
10. ☐ English Translation Document (if applicable)
11. ☒ Information Disclosure ☒ Copies of IDS
Statement (IDS)/PTO-1449 Citations
12. ☐ Preliminary Amendment
13. ☒ Return Receipt Postcard (MPEP 503)
14. ☐ Small Entity(2) ☐ Statement filed in prior
(Unsigned) Statement(s) Application
15. ☐ Certified Copy of Priority Document(s)
(If foreign priority is claimed)
16. ☐ Other: _____

17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. _____

18. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label or ☒ Correspondence address below
(Insert Customer No. Or Attach bar code label here) Cost: #21917NAME: Michael A. SlavinMcHale & Slavin, P.A.ADDRESS: 4440 PGA Blvd., Suite 402CITY: Palm Beach Gardens STATE: FL ZIP CODE: 33410COUNTRY: U.S.A. TELEPHONE: (561) 625-6575 FAX: (561) 625-6572

SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

FEE TRANSMITTAL

Date: 11/21/00

Total Amount DUE: \$ 355.00

METHOD OF PAYMENT (check one)

1. ☐ The Commissioner is hereby authorized to charge the filing fees and any additional fees to:

Deposit:

Account No. _____

Deposit

Account Name: United States Filter Corporation

☐ Charge any additional ☐ Charge the Issue Fee Set in

Fee required under 37 CFR 1.18 at the Mailing of

37 CFR 1.15 and 1.17 Notice of Allowance

2. ☐ Payment Not submitted

☒ Check ☐ Money Order ☐ Other

FEE CALCULATION

1. FILING FEE

Large Entity	Small Entity				
Fee	Fee	Fee	Fee	FEE DESCRIPTION/FEE PAID	
Code	(\$)	Code	(\$)		
101	710	201	355	Utility filing fee	<u>355</u>
106	320	206	160	Design filing fee	_____
107	490	207	245	Plant filing fee	_____
108	710	208	355	Reissue filing fee	_____
114	150	214	75	Provisional filing fee	_____

SUBTOTAL(1) \$355.00

Fee from

2. CLAIMS

Total Claims 13 - 20 = -0 - x 9 = \$ -0-

Independent 1 - 3 = 0 x 40 = \$ -0-

Multiple Dep 0 x 135 = \$ _____

Claims

Large Entity	Small Entity				
Fee	Fee	Fee	Fee	FEE DESCRIPTION	
Code	(\$)	Code	(\$)		

103 22 203 11 Claims in excess of 20

102 82 202 41 Ind. Claims in excess of 3

104 270 204 135 Mult. Dependent claim

109 82 209 41 Reissue Independent Claims

over Original Patent

110 22 210 11 Reissue Claims in excess

20 and over original patent

FEE SUBTOTAL(2) \$ 355.00 *Reduced by Basic filing fee **SUBTOTAL(3) _____** SUBMITTED BY: _____

Michael A. Slavin

Typed or printed Name: Michael A. Slavin Reg. No. 34,016

Signature: _____ Date: 11/21/00 Dep. Acct.: _____

Application Number : N/A

Filing Date : N/A

First Named Inventor: Odle et al

Group Art Unit : N/A

Examiner Name : N/A

Attorney Docket No. : 2224.001

FEE CALCULATION (continued)

3. ADDITIONAL FEES:

	Large Entity	Small Entity		
Fee	Fee	Fee	Fee	FEE DESCRIPTION
Code	(\$)	Code	(\$)	
105	130	205	65	Surcharge - late filing fee/oath
127	50	227	25	Surcharge - late provisional filing fee or cover sheet.
139	130	139	130	Non-English specification
147	2520	147	2520	For filing a Request. for Exam.
112	920*	112	920*	Req. publication of SIR prior Examiner Action
115	110	215	55	Extension - first month
116	400	216	200	Extension - second month
117	950	217	475	Extension - third month
118	1510	218	755	Extension - fourth month
128	2060	228	1030	Extension - fifth month
119	310	219	155	Notice of Appeal
120	310	220	155	Brief in support of Appln.
21	270	221	135	Req. for Oral Hearing
138	1510	138	1510	Petition to Institute Public Use Proceeding
140	110	240	55	Pet. to revive - unavoidable
141	1320	241	660	Pet. To revive - unintentional
142	1320	242	660	Utility Issue Fee
143	450	243	225	Design Issue Fee
144	670	244	335	Plant Issue Fee
122	130	122	130	Petitions to Commissioner
123	50	123	60	Petitions re: Provisional
126	240	126	240	Sub. Of Infor. Discl. Stm.
581	40	581	40	Record. Patent Assign.
146	290	246	395	Filing a Submission After Per property
				Final rejection (37 CFR .129(a)
149	790	249	395	For each addnl. invention to be examined (37 CFR 1.129(b)

Other fee (specify) _____

Other fee (specify) _____